

came pale, but the legs and feet now presented a similar appearance. The case might easily have been taken for measles, if the cutaneous symptoms only had been regarded, but there was none of the characteristic constitutional disturbance that attends that disease: the general health was, in fact, undisturbed. In the course of a few days the eruption entirely disappeared; and if any doubt had existed as to its cause, it was completely removed by the following circumstance: about three weeks after his recovery, the patient repeated a dose of the medicine, which he had accidentally kept; the eruption appeared on the following morning, and remained for two or three days.

A similar eruption is sometimes occasioned by the use of balsam copaiba; and two or three cases of the kind are related by Dr. Hewson in the 5th Vol. of the North American Medical and Surgical Journal.

4. *Case of Rupture of the Kidney.* By JAMES LAIDLAW, Esq.—October 11th, 1829. Alexander Elliot, a remarkably fine, healthy young man, twenty-one years of age, while running at full speed, came unexpectedly in contact with the iron palisades of one of the squares, and struck his abdomen against them with such force that he was thrown to the ground by the shock; he immediately got up, and not feeling himself, at the moment, much hurt, walked home, a distance not greater than a hundred yards. Soon after he got home, he became very sick, and vomited, but did not consider it of much consequence, till about two hours afterwards, when, having occasion to make water, he found nothing but blood flowed from the bladder; and he then became alarmed, and, procuring a coach, had himself conveyed to the hospital.

At the time of his admission, when I first saw him, he was pale, cold, and covered with a clammy perspiration; his countenance was anxious, and he was greatly agitated. Upon a superficial view, he appeared far more alarmed than injured. He complained of pain in the belly, particularly in the right hypochondriac region; his pulse was full and regular, at seventy-five. At his request some milk and water was given to him; but, immediately upon drinking it, he vomited it up. Twenty leeches were applied to the abdomen without delay.

In the evening the symptoms became more alarming; the vomiting increased, and was accompanied with constant hiccup, which greatly distressed him, the pain in the belly was also much greater; he rolled about in the bed, was very irritable and restless; the anxiety of countenance was much increased, and the respirations were more frequent than natural: he did not complain when the abdomen was pressed with the hand. As he had not made water since his admission, I introduced a catheter, and drew off about ten ounces of fluid, apparently chiefly blood, and directed that fifteen more leeches should be applied to the belly.

Upon visiting him early the following morning, (Oct. 12th,) he said he was somewhat easier, but had passed a miserable, restless night, and had been greatly distressed by the constant vomiting; his countenance was still very anxious, and he appeared to be suffering a good deal from alarm and agitation. A catheter was introduced, and twelve ounces of bloody urine drawn off: this he said greatly relieved him. Towards night he became much worse; the belly was swollen and tense, and he complained of great pain upon the application of the hand; the vomiting was not abated, and it distressed him much more in consequence of the tenderness of the abdomen. It was found necessary to continue the use of the catheter, and the urine was deeply tinged with blood. Pulse small, sharp and regular; its frequency not increased; tongue natural; skin hot and dry; and he complained of great thirst, which could be only partially allayed by moistening his mouth, as every thing he swallowed was instantly rejected. R. Hydrarg. Submur. gr. ij.; Pulv. Opii, gr. ss. statim. Haust. Potassæ Citrat. quartâ quâque hora.

October 13th.—Somewhat better; he has had some sleep during the night, and is greatly refreshed; the belly is less painful, and the swelling is diminished: he has passed about a pint of urine without the catheter. As his bowels were

confined, he was ordered an enema, and it has produced a copious evacuation, which he says has made him feel much more comfortable. Pulse small, sharp, and much increased in frequency; tongue white and moist. V.S. ad ξ xij. To continue the medicines.

October 14th.—He is greatly improved; his skin is cooler, and there is less irritability in the pulse; his bowels have been opened several times, and he passes his water naturally; he suffers very little. The blood drawn yesterday cupped and buffed. Ordered V.S. ad ξ x. Haust. Acetat. Ammon. $\bar{c}$ Liq. Antim. Tart. $\mathfrak{m}$ x. quartâ quâque hora.

October 16th.—Since the day before yesterday he has been gradually getting better: the pain in the belly has almost gone, and the only thing he now complains of is great thirst and an uncomfortable fullness of the belly. The blood which was taken on the 14th exhibited no inflammatory appearance.

For several days after the last report, every thing appeared to be going on favourably, and he seemed to be getting well rapidly, when suddenly, on the evening of the 21st October, he became much worse; his skin again became hot and dry; his tongue parched and covered with a brown fur; and the anxiety of countenance, which was so apparent at first, had again appeared; he complained of great pain in the right lumbar region; the pulse was full and frequent, but regular. As his bowels had not been opened during the day, an enema was ordered, and he was directed to take the following powder every four hours: R. Pulv: Rhei. gr. v.; Hydrarg. $\bar{c}$ Cretâ, gr. iij. M. fiat pulv.

On visiting him the following morning, (October 22d,) I found him in less pain than the preceding evening, but the other unfavourable symptoms were unabated. In the course of the day he had a severe shivering fit, which lasted for several minutes, and the pulse became very small and quick. Upon examining the belly, the part originally injured seemed to incline to the side, and appeared to contain fluid. He was directed to continue the medicines, and to have hot fomentations to the belly.

He continued in nearly the same condition during the two following days, (October 23d and 24th,) appearing only to get a little weaker; but on the morning of the 26th, it was evident that there was no hope of saving him, as he was sinking rapidly. He complained of no pain in any part; he was perfectly sensible and collected, frequently saying that he had made up his mind to die; his countenance was sallow and very anxious, and he appeared to breathe with great difficulty; the pulse was too quick to be counted; the tongue was black and dry, and the skin hot, and without the slightest moisture. He fancied he should like some soda water, and it was accordingly given him, with small quantities of wine occasionally. At seven o'clock in the evening he died, having survived the accident just fourteen days.

The body was examined eighteen hours after death. Upon opening the cavity of the abdomen, the intestines appeared of a dark sooty colour, which was all that was remarkable in them. The whole of the solid viscera were in a healthy condition, with the exception of the right kidney, which, as had been anticipated, was found to be the seat of the mischief: by the injury it had been broken across just below the pelvis, and in it and the surrounding cellular membrane a large abscess was formed, which contained about three pints of fluid of a light brown colour: this was supposed to be pus mixed with urine.—*London Medical and Physical Journal, Feb. 1832.*

5. *Case of Propagation of Ringworm by Contagion.*—M. COLLINEAU communicated to the Académie Royale de Médecine the following fact. In an establishment which contains between eleven and twelve hundred females, there is a particular department appropriated for the reception of girls from ten to sixteen years of age, in which they have communications only with each other, and with the persons intrusted with the care of them. In the month of August, 1831, a child with a ringworm on her shoulder, about ten or twelve lines in diameter, was admitted into this establishment. Two months afterwards, one of her companions had a similar ringworm on her arm, and also on her left cheek.